## Case 23-12170-pmm Doc 28 Filed 09/12/23 Entered 09/12/23 14:26:03 Desc Main Document Page 1 of 2

Fill	in this information to identify your ca	ase:									
Del	btor 1Douglas M. Kahler										
1	btor 2 Lori L. Kahle	r			_						
Uni	ited States Bankruptcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA	1	_						
Cas	se number 23-12170-PMM					Check if this is	:				
(If kr	nown)					☐ An amend	ed filing				
						☐ A supplem 13 income		g postpetition llowing date:			
0	fficial Form 106l					MM / DD/	YYYY				
S	chedule I: Your Inc	ome							12/1		
atta Pai	use. If you are separated and you ch a separate sheet to this form.  The describe Employment										
1.	Fill in your employment information.		Debtor 1			Debtor	Debtor 2 or non-filing spouse				
	If you have more than one job,	Employment status	☐ Employed	☐ Emp	☐ Employed						
	attach a separate page with information about additional employers.	Employment status	■ Not employed	■ Not €	■ Not employed						
	. ,	Occupation									
	Include part-time, seasonal, or self-employed work.	Employer's name									
	Occupation may include student or homemaker, if it applies.	Employer's address									
		How long employed th	nere?								
Pai	rt 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	ou have nothing to re	eport for a	any lin	e, write \$0 in the	e space. Incl	lude your no	n-filing		
	ou or your non-filing spouse have mo e space, attach a separate sheet to		mbine the information	n for all e	mploy	ers for that pers	on on the lin	nes below. If	you need		
					F	or Debtor 1	For Deb non-filir	otor 2 or ng spouse			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	0.00			
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$	0.00			
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	0.00			

Official Form 106I Schedule I: Your Income page 1

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	tor 1 tor 2	Douglas M. Kahler Lori L. Kahler	_	C	Case	e number (if known)	2	3-12170-P	MM	
	Con	Copy line 4 here			For Debtor 1		For Debtor non-filing s			
		*	4.		*-	0.00			0.00	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$_	0.00		\$	0.00	_
	5b.	Mandatory contributions for retirement plans	5b		\$_	0.00		\$	0.00	-
	5c.	Voluntary contributions for retirement plans	5c		\$_	0.00		\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d		\$_	0.00		\$	0.00	_
	5e.	Insurance	5e		\$_	0.00		\$	0.00	-
	5f.	Domestic support obligations	5f.		\$_	0.00		\$	0.00	-
	5g. 5h.	Union dues Other deductions. Specify:	5g		\$_ \$	0.00		\$	0.00	_
•	_		_ <sup>5h</sup>		. –	0.00			0.00	-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	0.00		\$	0.00	-
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	0.00		\$	0.00	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	<b>1</b> .	\$	0.00		\$	0.00	
	8b.	Interest and dividends	8b	).	\$	0.00		\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c	<b>:</b> .	\$	0.00		\$	0.00	-
	8d.	Unemployment compensation	8d	1.	\$	2,574.00		\$	0.00	
	8e.	Social Security	8e	€.	\$_	0.00		\$ 1	,913.30	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$_	0.00		\$	0.00	
	8g.	Pension or retirement income	8g		\$_	0.00		\$	0.00	-
	8h.	Other monthly income. Specify:	8h	1.+	\$_	0.00	+	\$	0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	2,574.00		\$	1,913.30	D
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,574.00 + \$		1,913.30	_ &	4,487.30
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	.0.	Ψ_		Σ,374.00		1,313.30		7,707.30
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00									
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certa ies							\$Combin	
13.	Do	you expect an increase or decrease within the year after you file this form	?						monthi	y income
		No. Yes. Explain:								